

09/655297

COMBINED DECLARATION AND POWER OF ATTORNEY

(Original, Design, Supplemental)

As a below named inventor, I hereby declare that:

TYPE OF DECLARATION

This declaration is of the following type:

- original
 design
 supplemental

INVENTORSHIP IDENTIFICATION

Warning: If the inventors are each not the inventors of all the claims, an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.

My residence, post office address and citizenship are as stated below, next to my name. I believe that I am the original, first and sole inventor (*if only one name is listed below*) original, first and joint inventor (*if plural names are listed below*) of the subject matter that is claimed, and for which a patent is sought on the invention entitled:

TITLE OF INVENTION

OUT-OF-BAND SECURITY NETWORKS FOR COMPUTER APPLICATIONS

SPECIFICATION IDENTIFICATION

The specification is attached hereto.

Note: "The following combinations of information supplied in an oath or declaration filed on the application filing date with a specific are acceptable as minimums for identifying a specification and compliance with any one of the items below will be accepted as complying with the identification requirement of 37 CFR 1.63:

"(1) name of inventor(s), and reference to an attached specification which is both attached to the oath or declaration at the time of execution and submitted with the oath or declaration on filing;

"(2) name of inventor(s), and attorney docket number which was on the specification as filed; or

"(3) name of inventor(s), and title which was on the specification as filed."

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claim(s).

I acknowledge the duty to disclose information, which is material to patentability as defined in 37 CFR § 1.56 and which is material to the examination of this application, namely, information where there is a substantial likelihood that a reasonable Examiner would consider it important in deciding whether to allow the application to issue as a patent,

POWER OF ATTORNEY

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

Siegmar Silber, Esq. Registration No. 26,233
Lawrence G. Fridman, Esq. Registration No. 31,615

(check the following item, if applicable)

Attached, as part of this declaration and power of attorney, is the authorization of the above-named attorney(s) to accept and follow instructions from my representative(s).

SEND CORRESPONDENCE TO

Siegmar Silber, Esq.
SILBER & FRIDMAN
66 Mount Prospect Avenue
Clifton, NJ 07013-1918

DIRECT TELEPHONE CALLS TO:

Siegmar Silber, Esq.
(973) 779-2580
FAX: (973) 779-4473

DECLARATION

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such wilful false statements may jeopardize the validity of the application or any patent issued thereon.

SIGNATURE(S)

Note: Carefully indicate the family (or Last) name, as it should appear on the filing receipt and all other documents.

Full name of sole or first Inventor

RAM
(Given Name)

(Middle Initial or Name)

PEMMARAJU
(Family or Last Name)

Inventor's signature *Ram Ram*
Date 09/01/2000 Country of Citizenship U. S. A.
Residence 8 PONDEROSA LANE, OLD BRIDGE, NEW JERSEY 08857
Post Office Address Same

Full Name of second joint inventor, if any

(Given Name) _____ (Middle Initial or Name) _____ (Family or Last Name) _____
Inventor's signature _____ Date _____ Country of Citizenship _____ Residence _____
Post Office Address _____

Full Name of third joint inventor, if any

(Given Name) _____ (Middle Initial or Name) _____ Family (or Last Name) _____
Inventor's signature _____ Date _____ Country of Citizenship _____
Residence _____
Post Office Address _____

**(Check proper box for any of the following added pages(s)
that form a part of this declaration)**

Authorization of attorney(s) to accept and follow instructions from representative

**(If not further pages form a part of this Declaration,
then end this Declaration with this page and check the following item)**



ATTORNEY'S DOCKET NO. PNE-203

PATENT

Applicant

Patentee _____

Application No.

Patent No. _____

Filed on _____

Issued on _____

Title: OUT-OF-BAND SECURITY NETWORKS FOR COMPUTER APPLICATION

**VERIFIED STATEMENT CLAIMING SMALL ENTITY STATUS
(37 CFR 1.9(f) and 1.27(c)-SMALL BUSINESS CONCERN**

I hereby declare that I am

the owner of the small business identified below

an official of the small business concern empowered to act on behalf of the concern identified below:

Name of Small Business Concern NET SECURE L.L.C.

Address of Small Business Concern 81 MARY STREET

LODI, NJ 07644

I hereby declare that the above-identified small business qualifies as a small business concern, as defined in 13 CFR 121.12, and reproduced in 37 CFR 1.9(d), for purposes of paying reduced fees to the United States Patent and Trademark Office under Sections 41(a) and (b) of Title 35, United States Code, in that the number of employees of the concern, including those of its affiliates, does not exceed 500 persons. For purposes of this statement, (1) the number of employees of the business concern is the average over the previous fiscal year, and (2) concerns are affiliates of each other when either, directly or indirectly, one concern controls or has the power to control both.

I hereby declare that the rights under contract or law have been conveyed to, and remain with, the small business concern identified above, with regard to the invention described in

the specification filed herewith, with title as listed above.

the application identified above.

the patent identified above.

If the rights held by the above-identified small business concern are not exclusive, each individual, concern, or organization having rights in the invention is listed below and no rights to the invention are held by any person, other than the inventor, who would not qualify as an independent inventor under 37 CFR 1.9(c), if that person had made the invention, or to any concern that would not qualify as a small business concern under 37 CFR 1.9(d), or a nonprofit organization under 37 CFR 1.9(e).

NOTE: Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities (37CFR1.27).

Each person, concern or organization to which I have assigned, granted, conveyed, or licensed or am under an obligation under contract or law to assign, grant, convey, or license any rights in the invention is listed below:

- No such person, concern, or organization exists.
 Each such person, concern or organization is listed below.*

*NOTE: Separate verified statements are required from each named person, concern organization having rights to the invention averring to their status as small entities. (37 CFR 1.27)

FULL NAME: ROBERT J. KOCH

ADDRESS : 81 MARY STREET, LODI, NEW JERSEY 07644

INDIVIDUAL SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION

FULL NAME _____

ADDRESS _____

INDIVIDUAL SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION

FULL NAME _____

ADDRESS _____

INDIVIDUAL SMALL BUSINESS CONCERN NONPROFIT ORGANIZATION

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on high status as a small entity is not longer appropriate. (37 CFR 1.28(b))

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this verified statement is directed.

Name of Person Signing ROBERT J. KOCH

Title of Person if Other Than Owner VICE PRESIDENT

Address of Person Signing 81 MARY STREET

LODI, NEW JERSEY 07644

SIGNATURE R. J. Koch DATE 09/01/2000